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FORM D

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NO. 158

NO

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D .

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ige burden
hours per respon	nse16.00

SEC	USE ONLY
Prefix	Serial
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VUNIFORM LIMITED OFFERING EXEMP	/IION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	1949 1944 6544 6444 1944 1944 1944 1944 1944 1944
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Secured Lending Fund, LLC	04020822
Address of Executive Offices (Number and Street, City, State, Zip Code) 801 No. 500 West, Suite 200, Bounfiful, UT 84010	Telephone Number (Including Area Code) 801-397-3300
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) N/A	Telephone Number (Including Area Code) N/A
Brief Description of Business	PROPERTY
Commercial Real Estate Lending Type of Business Organization	MAR 25 2004
corporation limited partnership, already formed to ther (pl	ease specify):
Limi.	ted Liability Co. FINANCIAL
Month Year Actual or Estimated Date of Incorporation or Organization: 0 1 0 4 K Actual Estim	ated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada, FN for other foreign jurisdiction)	(I) (I)
GENERAL INSTRUCTIONS Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities low or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	49.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	t the name of the issuer and offering, any changes ed in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	·
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sa are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unles filing of a federal notice.	emption. Conversely, failure to file the ss such exemption is predictated on the

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A BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner ☐ Director Check Box(es) that Apply: ▼ Promoter Executive Officer General and/or Managing Partner K-BRO ENTERPRISES, LLC Full Name (Last name first, if individual) 801 No. 500 West, Suite 200, Bountiful, UT 84010 Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Keys, Robert L. Full Name (Last name first, if individual) 1550 NW Eastman Parkway, Suite 150, Gresham, OR 97030 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Brower, Lee M. Full Name (Last name first, if individual) 801 No. 500 West, Suite 200, Bountiful, UT 84010 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

19	W-7145				BI	NFORMAT	ION ABOU	T OFFERI	NG :			生物制	
1	Has the	issuer sal	d, or does th	ne issuer i	ntend to se	U to non-a	occredited i	nvestors in	this offer	ing?		Yes	No ⊠
1.	mas the	133461 3011	i, or does in			n, to ttotic n Appendix			•		••••••••	LJ	M
2.	What is	the minim	num investm					_				\$_N/	'A
												Yes	No
3.		_	permit joint										
4.			tion request ilar remune										
	lf a pers	on to be lis	ited is an ass	ociated pe	rson or age	ent of a brol	cer or deale	r registered	d with the S	SEC and/or	with a state	2	
			ame of the b , you may so							ctated pers	sons of suci	ī	
Ful			first, if indi										
			e Cons					Regi	stered	Brok	er Dea	aler)	
Bus			Address (N W East					0, Gr	esham,	OR 9	7030		
Nar	me of Ass	sociated Br	oker or Dea	aler			· · · · · · · · · · · · · · · · · · ·	····					·
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	IL MT	NE	[XV]	KS NH		[NM]	[MY]	NC	ND	OH)	OK)	XXX.	[MO]
	RI	SC	SD	M	TX	AUT	XVT	VA	₩A	WV	WI	XXX	PR
Ful	l Name (ast name	first, if indi	vidual)									
			· 										
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)						
Nar	me of Ass	ociated Br	oker or Dea	ıler								······································	
									·				
Stat		ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(01 1				C							· · ·	C
	(Check		" or check	individual	States)	······································	***************************************		•••••	•••••		☐ All	States
	AL	"All States	or check	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪŪ
	AL IL	"All States AK IN	" or check i	AR KS	CA KY	CO	CT ME	DE MD	DC MA	FL	GA MN	HI MS	ID MO
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Full	AL IL MT RI	"All States AK IN NE SC	" or check in AZ IA	AR KS NH TN	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	AL IL MT RI Name (I	"All States AK IN NE SC ast name	" or check in AZ IA IV SD	AR KS NH TN vidual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	AL IL MT RI Name (I	"All States AK IN NE SC ast name	" or check in AZ IA	AR KS NH TN vidual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bus	AL IL MT RI Name (I	"All States AK IN NE SC Last name	" or check in AZ IA IV SD	AR KS NH TN vidual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND WA	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bus	AL IL MT RI I Name (I	"All States AK IN NE SC Last name Residence	" or check in AZ IA NV SD SD Address (No oker or Dea	AR KS NH TN vidual)	CA KY NJ TX d Street, C	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bus	AL IL MT RI Name (I siness or me of Ass	"All States AK IN NE SC Ast name Residence	" or check in AZ IA NV SD First, if individual Address (Notes or Dea	AR KS NH TN vidual) vidual)	CA KY NJ TX d Street, C	CO LA NM UT ity, State, 2	CT ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
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Bus	AL IL MT RI I Name (I siness or me of Assites in What (Check I AL	"All States AK IN NE SC Ast name Residence ociated Br ich Person "All States AK	" or check in AZ IA NV SD SD STATE IN IT I	AR KS NH TN vidual) fumber an eler Solicited individual	CA KY NJ TX d Street, C or Intends States)	CO LA NM UT ity, State, 2	CT ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			•	
		Aggregate Offering Price		nount Aiready Sold	
	Debt	25,000	0,000	2,460,	,000
	Equity		<u> </u>		0
	Equity Common Preferred				
	Convertible Securities (including warrants)		•		. 0
٠	Partnership Interests S				0
	Other (Specify)		•		0
	Total	25,000	70 0 0	2,460,	,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	: · · ·		. · · · · · · · · · · · · · · · · · · ·	
		Number Investors	_	Aggregate ollar Amount of Purchases	
	Accredited Investors		16\$	2,460	000
	Non-accredited Investors				0
	Total (for filings under Rule 504 only)				•
	Answer also in Appendix, Column 4, if filing under ULOE.	 	3/12/30-		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				:
	Type of Offering	Type of Security	D	ollar Amount Sold	
	Rule 505		· \1/Δ\$_		N/
	Regulation A		1/Δ ^S _	<u> </u>	N/2
	Rule 504		N/ ZX N/ A\$		NI/.
	Total		· S		
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		N/A	•	N/2
•	Transfer Agent's Fees	· [] \$	0	
	Printing and Engraving Costs		s	300	
	Legal Fees		\ s	35.000	1
	Accounting Fees	_		5,000	
	Engineering Fees] \$	0	
٠	Sales Commissions (specify finders' fees separately)		1 s	1,500,000)
	Other Expenses (identify) Postage, Tolephone and other charges			1,500	
	Total	<u> </u>	_	1,541,800	

and total expenses furnished in response to Part C — Question 4.a. proceeds to the issuer."			s 1,541,800
Indicate below the amount of the adjusted gross proceed to the i each of the purposes shown. If the amount for any purpose is check the box to the left of the estimate. The total of the payment proceeds to the issuer set forth in response to Part C — Questi	not known, furnish an estimate a is listed must equal the adjusted gro	nd	
		Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees		🗆 \$ <u>O</u>	s _ <u>O</u>
Purchase of real estate	······································	🗆 \$	_ 🗆 \$
Purchase, rental or leasing and installation of machinery and equipment		o	s
Construction or leasing of plant buildings and facilities		🗆 \$0	\$ <u></u>
Acquisition of other businesses (including the value of securit offering that may be used in exchange for the assets or securit issuer pursuant to a merger)	ies of another	[s 0	so
Repayment of indebtedness		🔲 \$. 🗆 \$
Working capital		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	,000_0
Other (specify):		\$0	s <u></u>
		- \$ <u>O </u>	s <u></u> 0
Column Totals	·····	x \$ 25,000	, 2 030 0
Total Payments Listed (column totals added)		⊠ \$2	5,000,000

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)		*	Si
Commend Tondina	Fund	TTC	ــ ا

Secured Lending Fund, LLC

Name of Signer (Print or Type)

Lee M. Brower

Signature / Nome

Date 3/12/04

Title of Signer (Print or Type)

Manager of K-Bro Enterprises, LLC

Which is the Manager of Secured Lending Fund, LL

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No [X]
	See Appendix Column 5 for state response		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

·				<u> </u>			
Issuer (Print or Type)			Signature		Date	1	
Secured Lending	Fund,	LLC	(h)	rer	31	12/04	
Name (Print or Type)			Title (Print or Type)				

Lee M. Brower

Manager of K-BRO Enterprises, LLC

Which is the Manager of Lecured Lending Fund, LL(

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				A Carte Control	PPENDIX 15				
1	Intend to non-a investor	i to sell accredited as in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL					·		·		
AK									
AZ		x	25,000,000	·	·			٠	x
AR				·					
CA		x	25,000,000	3	910,000	0	0		x
C <u>O</u>	•			<u> </u>					
СТ									
DE								·	
DC	· ·						·		
FL		x	25,000,000	1	400,000	0;	0		<u>x</u> _
GA		х	25,000,000	. 4	380,000) 0	0		х
HI									
ID		····						<u>-</u>	
, IL									
IN		х	25,000,000	·					х
IA									
KS	·								
KY	·								
LA		х	25,000,000						x
ME									
MD									
MA		х	25,000,000						х
MI					<u> </u>				<u> </u>
MN									
MS		×	25,000,000	.1	70,000	O C	0	-	×

APPENDIX

1	Type of security Intend to sell and aggregate to non-accredited offering price Type of investor and investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2)						under St (if yes explan waiver	lification ate ULOE , attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT									
NE									
NV		х	25,000,000		·	·			x
NH				·		<i>y</i> .			
ИЛ		×	25,000,000					,	×
NM									
NY		x	25,000,000			,			x
NC						·			
ND	·				, , ,				
ОН									
ОК									
OR	·	x	25,000,000						x
PA		x	25,000,000					-	х
RI									. ,
SC									
SD				·					
TN		х	25,000,000						x
TX		х	25,000,000						x
UT		х	25,000,000						x
VT		х	25,000,000	1_	100,000	0	0		X
VA			25 000 000		. 00 00				
WA		x	25,000,000	2	200,00	0	0		X
WV								.,	
WI									

1	to non-z	2 I to sell accredited as in StateItem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		х	25,000,000	3	400,000	0.0	0		x
PR									